



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
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DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

December 14, 2007

## GENERAL LETTER NO. 23-I-AP-17

ISSUED BY: Division of Fiscal Management

SUBJECT: Management Manual, Title 23, Chapter I, ***RANDOM MOMENT SAMPLE SYSTEM APPENDIX***, Title page, revised; Contents (page 1), revised; pages 1 through 21, revised; and the following forms:

470-2777 *Random Moment Survey: Iowa - SW*, revised  
470-2778 *Random Moment Survey: Iowa - IM*, revised

### Summary

This chapter is revised to update the instructions and current versions of the forms to reflect current policies.

### Effective Date

Immediately.

### Material Superseded

Remove the entire Chapter I, Appendix, from Management Manual, Title 23, and destroy it. This includes the following pages:

<u>Page</u>	<u>Date</u>
Title page	December 26, 2000
Contents (page 1)	December 26, 2000
470-2777	7/2000
1-12	December 26, 2000
470-2778	03/2001
13-16	December 26, 2000
17, 18	June 17, 2003
19-21	December 26, 2000

### Additional Information

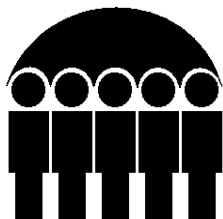
Refer questions about this general letter to your area income maintenance or service administrator.

Revised December 14, 2007

Management Manual  
Title 23  
Chapter I Appendix

# **RANDOM MOMENT SAMPLE SYSTEM**

## **APPENDIX**



Iowa  
Department  
of  
Human Services

Page

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# Random Moment Survey

PLEASE COMPLETE WITHIN 2  
BUSINESS DAYS

Iowa - SW  
Period: Mmm-D-YYYY to Mmm-d-YYYY



Employee:  
Group: SW  
Shift:

Moment:  
Seq Num:  
Location:

## Programs (please select only one):

- ☐ 10 Child Protective Assessments
- ☐ 15 CINA Assessments
- ☐ 20 Family Foster Care – Licensed/In-Process
- ☐ 25 Unlicensed Relative Care (i.e. Relative Placement)
- ☐ 30 PMIC
- ☐ 35 Shelter Care
- ☐ 40 Group Care
- ☐ 45 Supervised Apartments (Formerly FC-Independent Living)
- ☐ 50 Adoption (Pre and Post)
- ☐ 55 Interstate Compact (Incoming)
- ☐ 60 Intact Family Services
- ☐ 65 Subsidized Guardianship
- ☐ 70 Child Care Services (Home Registrations)
- ☐ 75 State Institution Placements
- ☐ 80 In-home Health Related Care
- ☐ 85 Adult Protective and Support Services
- ☐ 90 Family-Life Home
- ☐ 95 Medicaid Waiver Services
- ☐ 300 Any Other Service – **Must** Specify
- ☐ 400 Not Service Specific

## Activities (please select only one):

- ☐ 200 Child Screening/Intake
- ☐ 205 CINA Intake through Completion of CINA Assignments
- ☐ 210 Actions involving court proceedings to remove child from home
- ☐ 215 Child Placement
- ☐ 220 Pre-placement Activities
- ☐ 225 IV-E Eligibility Forms Preparation and Completion for Sending to IV-E Unit
- ☐ 230 Judicial hearing/reviews
- ☐ 235 Initial Child Protective Services (CPS) Assessment
- ☐ 240 Identify Medical Service Needs and Collaborate with Health Care Providers
- ☐ 245 Identify Services and Complete Referrals
- ☐ 250 Protective Child Care Eligibility/Referral

(Activities continued in the next column)

## Activities (continue from first column):

- ☐ 255 Referral to Community Care Agency
- ☐ 260 Ongoing Assessment of Family Functioning
- ☐ 265 Case Documentation
- ☐ 270 Case Collaboration/Family Team Meeting
- ☐ 275 Case Permanency Planning
- ☐ 280 Case Supervision
- ☐ 285 Case Consultation
- ☐ 290 Professional Consultation Outside of DHS
- ☐ 295 Client Transportation
- ☐ 300 Develop, Monitor, Document Transition Plan
- ☐ 305 DHS Direct Child Welfare Service Provision
- ☐ 310 Foster Care Administrative Review/FCRB
- ☐ 315 Resource Family (Foster Home/Adoptive Home) Provider Recruitment or Licensing
- ☐ 320 Participate in Adoptive/Foster Parent Training
- ☐ 325 Child Care Registration or Complaint Investigation
- ☐ 330 ALJ Hearings and Appeals
- ☐ 335 Adult Services (AS) Screening/Intake
- ☐ 340 Adult Protective Assessment/Interview
- ☐ 345 XIX (Medicaid) Application Process for Health Services
- ☐ 350 AS Judicial Proceedings
- ☐ 355 AS Assessment/Service Eligibility
- ☐ 360 AS Case Plan Development
- ☐ 365 AS Placement
- ☐ 370 AS Case Documentation
- ☐ 375 AS Case Supervision
- ☐ 380 AS Case Consultation
- ☐ 385 AS Professional Consultation Outside DHS
- ☐ 390 AS Client Transportation
- ☐ 395 AS ALJ Hearings and Appeals
- ☐ 400 Conduct/Participate in Admin Meetings/Trainings
- ☐ 405 Conduct/Participate in Service Specific Staff Training
- ☐ 410 Resource Development
- ☐ 415 Professional Reading/Review Manual
- ☐ 420 General Administrative Functions
- ☐ 450 All Other Activities – **Must** Specify
- ☐ 500 Lunch
- ☐ 600 Vacation, Breaks, Personal, Illness, Military (paid leave)
- ☐ 800 Sample Outside Scheduled Work Hours
- ☐ 999 Position Vacant or Unpaid Leave

## Case Information (if applicable):

Case Number: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Witness Signature)

\_\_\_\_\_  
(Date)

RMS Administrator

470-2777 (Rev. 11/07)

**Random Moment Survey: Iowa - SW, Form 470-2777**

Purpose	Form 470-2777 is used to collect work activity reports for social services staff. The information reported on this form is used to determine how various programs are funded with state and federal dollars. Random moment sampling is NOT for evaluating individual performance.
Completion	<p>The RMS administrator e-mails an RMS observation form to each sampled worker for completion. Included in the e-mail is the sample moment date and time, instructions on accessing and completing the observation form found on the intranet, and contact information for questions or concerns.</p> <p>After the sampled worker completes and submits the form, the screen will change and a message will appear letting the worker know that the response was successfully recorded in the RMS database.</p>
Data	The form is divided into four steps. Select only one item from the drop down menu in each section where applicable.
<b>Step I: Services</b>	<p>Select the one most appropriate service category in which you are working at the chosen moment. If you need help in determining which service to select, please refer to the following descriptions or rollover a choice on the Intranet form's pull-down list to review the service description.</p> <p><b>10 Child Protective Assessments</b> includes services related to the assessment of reports that children have been or are suspected of being abused, neglected, or exploited by their parents, legal guardians or other care takers, including the need for ongoing child welfare services, safety and risk assessment, court intervention or out of home placement.</p>

- 15 CINA Assessments** include services related to the assessment of child's need for CINA adjudication, when there is no allegation of child abuse, including assessments of family strengths and needs, recommendations on filing a CINA, and determining what services are available in the community with or without court order. This may include determining the need for ongoing child welfare services, court intervention, or out of home placement.
- 20 Family Foster Care – Licensed/In-Process** provides services in a licensed relative or non-relative foster family home, or in a relative home that is in the process of becoming licensed. Also use this service code for licensing or recruiting foster family homes.
- 25 Unlicensed Relative Care (e.g., Relative Placement)** provides services in an unlicensed relative home when the family has not submitted an application to be licensed as a family foster care home.
- 30 PMIC** provides services to a child placed in a specialized psychiatric medical institution for children and adolescents.
- 35 Shelter Care** provides placement on a temporary basis in a licensed or approved shelter.
- 40 Group Care** provides services in a licensed group care setting.
- 45 Supervised Apartments (formerly FC-Independent Living)** provides services to adolescent youth living in supervised apartment placement outside the parental home to more effectively prepare them for self-sufficiency or independence (Transition Plan).

- 50 Adoption (Pre and Post)** provides adoption services to children whose parental rights have been terminated who are in the process of being terminated or who have a concurrent permanency goal of adoption so the children do not have to remain, or be placed, in foster homes, group care, or institutions. This service also includes post finalization activities, subsidies, recruitment, adoption studies and case consultation efforts to support adoptive or potentially adoptive parents. Also use this code for all training specifically related to adoption services.
- 55 Interstate Compact (Incoming)** includes completion of pre-placement home studies or arranging for the purchase of home studies, case management, and direct services and supervision provided to a child or youth who is under the jurisdiction of an another state's court or human services department.
- 60 Intact Family Services** provide services and support parenting, to a child or children living with their parents. Includes services funded by DHS (e.g., DECAT), services funded through another state or community agency (e.g., substance abuse treatment), or informal services and supports.
- 65 Subsidized Guardianship** provides services to children that are in a guardianship placement in which the guardian is receiving a subsidy through DHS.
- 70 Child Care Services (Home Registrations)**. This service is used for home registration activities and complaint investigations
- 75 State Institution Placements** includes services provided to children who have been committed to state institutions (e.g. Toledo, Eldora), Resource Centers or MHI.
- 80 In-Home Health Related Care** provide personal and skilled care services in a person's home when the person's state of physical or mental health prevents independent self-care. Services shall be approved by a physician and supervised by a registered nurse and primarily for clients 18 years of age and older.

**85 Adult Protective and Support Services** provide intake, assessment to determine supports for dependent adults who are unable to protect their own interests or who are harmed or threatened with harm through action or inaction by another person or through their own actions due to ignorance, incompetence, or poor health.

These services and supports are intended to avoid physical or mental injury; neglect or maltreatment; failure to receive adequate food, shelter or clothing; deprivation of entitlements; or diminution of resources and enable them to remain in their homes.

These home-care services are intended to provide physical, mental and environmental stimulation and to prevent or reduce the incidence of institutionalization.

**90 Family-Life Home** provides services in a single-family living unit to a physically or mentally challenged or elderly person in need of room and board within a family setting.

**95 Medicaid Waiver Services** maintain people in their own homes or communities who would otherwise require care in medical institutions. These services are provided only to certain client groups for whom a federal waiver has been approved; and waiver services are not available to other Medicaid members. Claims are processed through the Iowa Medicaid Enterprise (IME) the Medicaid fiscal agent.

**300 Any Other Service – Must Specify** includes any service not listed above. If you select this code, you must describe the specific service area in which you are working in the space provided in Step IV Comments.

**400 Not Service Specific** is used when choosing activity code 500 (lunch), 600 (vacation, breaks, personal business, illness, paid leave), 800 (sample outside scheduled work hours), or 999 (position vacant, unpaid leave).

**Step II: Activity** Select the one activity that best describes what you are doing at the chosen moment. The choices in this section are organized into two groups:

**Caseload Activity.** These activities apply to most of the choices and generally relate to case-specific activity. If you are traveling for a case specific activity, please select the choice that best describes the purpose of the travel. For example, if you were on the way to or from a court hearing or review, select the activity code describing this effort (e.g., actions involving court proceedings to remove child from home or judicial hearings/reviews (after removal)).

**Administrative Activity** is not case specific, but it can relate to a service area (e.g., service specific training). However, lunch, breaks, paid leave, position vacant are not service specific and are only valid with Service Choice 400 Not Service Specific.

If you need help in determining which activity to select, please refer to the following descriptions or rollover the activity in the intranet form's pull-down list to review the definition.

**200 Child Screening/Intake** includes receipt of calls or other communication alleging abuse to a child, eliciting information to make a determination of acceptance or rejection of the allegation report for assessment, provision of intake decision to the individual responsible to conduct the assessment.

**205 CINA Intake through Completion of CINA**

**Assessments** includes service intake functions, including circumstances that exist that would justify filing of a CINA petition, and providing applicant with information and referral assistance.

**210 Actions involving court proceedings to remove child from home** includes preparation of court report and study, appearing at hearings, providing testimony, and coordination of information for the court.

**215 Child Placement** includes development of the placement plan, service agreements with respect to arranging for supervision or other provider services.

**220 Pre-placement Activities** include organizing and sending client referral information to secure an appropriate placement. They also include contacts with placement agencies (or families) and transporting client for preplacement visits to in state or out of state placement.

**225 IV-E Eligibility Forms Preparation and Completion for Sending to IV-E Unit** includes case file review, completion of required forms and gathering required documentation (e.g., court documents) needed to forward to the IV-E unit in order to determine IV-E eligibility.

**230 Judicial hearings/reviews (after removal)** includes file review, preparation of court report and study, appearing at hearings, providing testimony, and coordination of information for the court.

**235 Initial Child Protective Services (CPS) Assessment** includes planning for and conducting the CPS assessment, determining if report is confirmed, conducting safety and risk assessments and establishing a Safety Plan.

**240 Identify Medical Service Needs and Collaborate with Health Care Providers** includes prescreening of children for mental health services; providing consultation to parents in selecting mental health services and other health care providers; selecting physical and mental health providers for children in foster care, integrating physical and mental health treatment plan into the DHS family case plan; and updating DHS family case plan for health care changes.

**245 Identify Services and Complete Referrals** includes referral readiness, and referral to community services other than health care providers and community care, such as area education agency, energy assistance, employment assistance, low-income housing, etc.

**250 Protective Child Care Eligibility/Referral** includes activity to determine if childcare will reduce the potential for child abuse and to make a child care services referral for children.

**255 Referral to Community Care Agency** includes referral readiness and referral of family to the designated community care agency.

**260 Ongoing Assessment of Family Functioning** includes evaluation of safety and risk factors, family functioning, and engaging the family in appropriate services to enhance family strengths and meet identified needs in a culturally sensitive manner.

**265 Case Documentation** includes documenting contacts and observations, preparing narratives on the client's situation, purchase of service provision and client progress, as well as completion of general forms such as FACS, STAR, SRS, ABC, etc.

**270 Case Collaboration/Family Team Meeting** includes meetings where client progress is discussed with the family or involved service providers, as well as preparing for and participation in the family team meetings or mediation to engage the family in referral readiness and continuing appropriate services to enhance family strengths and address safety, well-being and permanency issues.

**275 Case Permanency Planning** includes time spent engaging the family in developing the case permanency goal and plan for the child; gathering information from the child, parents, providers and collaterals; preparing and reviewing a child's case permanency plan (family case plan); and gathering information to develop concurrent permanency options (e.g., adoption or guardianship) if reunification is not achievable.

**280 Case Supervision** includes arranging and monitoring client support, obtaining purchase of services, monitoring community based services (e.g., substance abuse) and preparing for and attending case staffings.

- 285 Case Consultation** includes discussion with a supervisor relating to a specific case.
- 290 Professional Consultation Outside of DHS** includes reviews and discussions with professionals to assess strengths and needs, promote referral readiness, resolve problems related to clients' behavior, family, and social environment, or access the support and assessments of experts to substantiate CPS Assessment Summary findings or support recommendations to the court.
- 295 Client Transportation** includes transportation related to judicial determinations, child placements, case reviews, and other case management and supervisory-related functions except family team meetings.
- 300 Develop, Monitor, Document Transition Plan** includes activities related to the assessment, planning and supporting youth to successfully transition out of foster care to independence, including sharing information on Aftercare, PAL, MIYA, etc.
- 305 DHS Direct Child Welfare Service Provision** includes DHS staff providing direct services to the child or family to resolve the issues that led to DHS opening a child welfare case.
- 310 Foster Care Administrative Review/FCRB** includes preparation for and participation in initial preplacement, 30-day or six-month foster care administrative reviews (e.g. writing reports, sending notices, etc.), whether conducted by the Department or by local foster care review boards.

**315 Resource Family (Foster Home/Adoptive Home)**

**Provider Recruitment or Licensing** includes speaking to prospective applicants, participating in local forums or public service programs to inform the public of need, composing brochures or flyers, distributing existing materials, other promotional activities that are directly related to recruitment and licensing, participating in recruitment committees, initial approval licensure, performing criminal and child abuse records checks, interim monitoring, renewals, denials, and revocations. Do not use this choice for foster and adoptive parent training.

**320 Participate in Adoptive/Foster Parent Training**

includes preparation for the purpose of conducting or participating in adoptive or foster care parent training, as well as the actual provision of such training.

**325 Child Care Registration or Complaint Investigation**

includes activities for registration of childcare providers, including complaint investigations and spot checks.

**330 ALJ Hearings and Appeals** include file review, preparation of testimony (written or oral), appearance at hearing, and completion of appropriate forms.

**335 Adult Services (AS) Screening/Intake** includes receipt of calls or other communication alleging abuse to an adult, eliciting information to make a determination of acceptance or rejection of the allegation for assessment, provision of intake decision to referent.

**340 Adult Protective Assessment/Interview** includes assessing the safety of the client, and ascertaining if abuse or neglect has occurred. This activity also covers the protective interview process, including travel to and from protective interviews. (If the purpose of the interview is to determine eligibility, then use AS Assessment/Service Eligibility.)

**345 XIX (Medicaid) Application Process for Health**

**Services** includes completing and sending to eligibility worker documentation such as court order, releases, financial information and other required data.

**350 AS Judicial Proceedings** includes file review, preparation of court report and study, appearing at hearings, providing testimony and coordination of information for the court.

**355 AS Assessment/Service Eligibility** includes evaluation of client's ability to function at the highest level possible with appropriate interventions. Use this activity to complete initial service eligibility documents.

**360 AS Case Plan Development** includes gathering client, provider and collateral contacts, input in to case plan and time spent preparing and reviewing the case plan with the client and the family.

**365 AS Placement** includes assistance in finding alternative housing arrangements for client.

**370 AS Case Documentation** includes preparing notes and preparing and reviewing reports on the client's situation, service provision and client progress, as well as completion of general forms such as SRS, ABC and turning forms in for data entry.

**375 AS Case Supervision** includes arranging and monitoring client support, obtaining services, monitoring community based services and preparing for and attending case staffings.

**380 AS Case Consultation** includes discussion with a supervisor on issues relating to a specific case.

**385 AS Professional Consultation Outside DHS** includes reviews and discussions with professionals to resolve problems related to clients' behavior, family or social environment; to assess strengths, needs, promote referral readiness; and to access the support and assessments of experts to substantiate Adult Protective Evaluation findings or support recommendations to the Court.

**390 AS Client Transportation** includes transportation of client related to judicial proceedings, placements and other case management and supervisory-related functions where client is transported to appointment or meeting. Staff travel for other activities is coded with the activity that requires staff to be out of the office.

**395 AS ALJ Hearings and Appeals** include file review, preparation of testimony (written or oral), appearance at hearing, and completion of appropriate forms.

**Administrative Activity:** These are activities that do not relate to work being done on a specific case. However, the activity can relate to a service area. The activities in this area are primarily used for general job duties, administrative training, or time away from your work area.

Do not use a code in this series if there is a specific activity choice that better describes the activity being performed.

**400 Conduct/Participate in Admin Meetings/Trainings** for the purpose of conducting or participating in unit or staff meetings as well as the actual participation or leading of unit or staff meetings. The meetings and trainings are general in nature and are not specific to one service area. This code includes training on administrative topics such as completion of time sheets, travel requests, RMS intranet forms.

**405 Conduct/Participate in Service Specific Staff Training** include preparation for the purpose of conducting or participating in program or service area, as well as the actual leading of or participation in the training courses.

**410 Resource Development** includes activities related to expanding the base of prospective service providers and other community-based resources. This includes speaking to community groups. (Use code 315 for activities related to recruitment and licensing of foster families, group homes, shelters, day care, and adoptive parents.)

**415 Professional Reading/Review Manual** includes professional reading as required to maintain current job knowledge or to track relevant program or legal issues. Also includes reviewing program policy manuals and program policy updates as related to your area of responsibility.

**420 General Administrative Functions** include all other non-case-related activity, such as organizing desk, filing, attending to general clerical matters, the training of mandatory reporters, community meetings, emails, voice mails, etc.

**450 All Other Activities – Must Specify** is used when no other code in Step II describes the activity being done. Please specify the nature of this activity in the space provided on the observation form.

**500 Lunch.** Sample time during lunch.

**600 Vacation, Breaks, Personal, Illness, Military (paid leave)** is used for approved leave.

**800 Sample Outside Scheduled Work Hours.** The observation time is when the employee is not routinely scheduled to be at work.

**999 Position Vacant or Unpaid Leave** means leave without pay, position vacancy.

**Step III:  
Case Number**

If you are working on a specific case at the time of the sample, you will need to include the case number, name or Social Security number on the intranet form.

**Step IV: Comments** You must specify the program if you selected Service Code 300 (Any Other Service) in Step 1 above, or specify the activity if you selected Activity Code 450 in Step II above. You may also include in the comments section any information relevant to the sample moment, such as describing specific actions associated with the activity (i.e., traveling to court).

PLEASE COMPLETE WITHIN 2  
BUSINESS DAYS

**Random Moment Survey**  
Iowa - IM  
**Period:** Mmm-D-YYYY to Mmm-d-YYYY



**Employee:**  
**Group:** IM  
**Shift:**

**Moment:**  
**Seq Num:**  
**Location:**

**Programs (please select only one):**

- ☐ 100 Family Investment Program (FIP)
- ☐ 102 Child Care Assistance
- ☐ 105 Food Assistance AND FIP
- ☐ 106 Food Assistance AND Medicaid
- ☐ 107 Food Assistance
- ☐ 109 Medicaid (FMAP-Related)
- ☐ 110 Medicaid (SSI-Related)
- ☐ 111 Medical for Foster Care/Adoption (FBU 19)
- ☐ 112 Medicaid (other than 109 – 111)
- ☐ 128 Medicare Part D Low Income Subsidy (LIS)
- ☐ 129 IowaCare
- ☐ 135 State Supplementary Assistance
- ☐ 140 Refugee Cash Assistance (06 aid type)
- ☐ 141 Refugee Medical Assistance (06 aid type)
- ☐ 300 Any Other Program (must specify)
- ☐ 400 Not Limited to Specific Program

**Activities (please select only one):**

- ☐ 300 Screening Interview/Intake
- ☐ 301 Application/Certification
- ☐ 302 Redetermination (review/recertification)
- ☐ 303 Process Changes to Ongoing Case
- ☐ 304 Cancellation
- ☐ 305 Overpayment/Underpayment Processing
- ☐ 306 Case Documentation
- ☐ 307 Hearings and Appeals
- ☐ 308 Information and Referral
- ☐ 309 Home Visit
- ☐ 311 Sanctions/Disqualifications
- ☐ 312 Verification of Alien Status
- ☐ 313 Case Reading
- ☐ 315 Benefit Replacement
- ☐ 317 Electronic Benefit Transfer (EBT) Issuance
- ☐ 318 Voter Registration
- ☐ 319 Case Consultation
- ☐ 400 Conduct/Participate in Meetings
- ☐ 401 Conduct/Participate in Program Specific Training
- ☐ 403 Supervisory Meeting (not case specific)
- ☐ 404 General Administrative Functions
- ☐ 450 All Other Activities (must specify)
- ☐ 500 Lunch
- ☐ 600 Vacation, Breaks, Personal, Ill and Military
- ☐ 800 Sample Outside Scheduled Work Hours
- ☐ 999 Position Vacant or Unpaid Leave

**Case Information (if applicable):**

Case Number: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Witness Signature)

\_\_\_\_\_  
(Date)

RMS Administration

### Random Moment Survey: Iowa - IM, Form 470-2778

Purpose	Form 470-2778 is used to collect work activity reports for income maintenance staff. The information reported on this form is used to determine how various programs are funded with state and federal dollars. Random moment sampling is NOT for evaluating individual performance.
Completion	<p>The RMS Administrator e-mails an RMS observation form to each sampled worker for completion. Included in the e-mail is the sample moment date and time, instructions on accessing and completing the observation form found on the intranet, and contact information for questions or concerns.</p> <p>After the sampled worker completes and submits the form, the screen will change and a message will appear letting the worker know that the response was successfully recorded in the RMS database.</p>
Data	The form is divided into four steps (sections). Select only one item from the drop down menu in each section where applicable.
<b>Step I: Program</b>	<p>Select the one most appropriate program category in which you are working at the chosen moment. Do not select the program based on the current eligibility status of the client, but instead pick based on the program you are actually working on at the time of the chosen sample moment.</p> <p>If you need help in determining which program to select, please refer to the following descriptions:</p> <p><b>100 Family Investment Program (FIP)</b> provides aid to needy families with children.</p> <p><b>102 Child Care Assistance</b> provides a subsidy for child care services (less than 24 hours per day) to eligible children of low-income parents in a licensed, registered, or approved non-registered setting.</p>

**105 Food Assistance AND FIP** provides assistance to FIP eligibles to access FIP services AND provide assistance to increase the food purchasing power of households receiving public assistance in the form of FIP benefits.

**106 Food Assistance AND Medicaid** provides assistance to Medicaid eligibles to access Medicaid services AND provide assistance to increase the food purchasing power of households receiving Medicaid but not receiving FIP.

**107 Food Assistance** provides assistance to increase the food purchasing power of households with low income, but not providing assistance to access other programs such as FIP or Medicaid during the sampled moment.

**109 Medicaid (FMAP-Related)** provides Medicaid coverage for persons whose eligibility is derived from the regulations governing the FMAP program.

Included in this program area are FMAP, Medically Needy, transitional or extended Medicaid, CMAP, FMAP-related automatic redetermination, children in PMICs and MAC (pregnant women, infants and children) related cases. (Aid types 30-8, 37-E, 37-0, 37-2, 38-0, and 92-0)

**110 Medicaid (SSI-Related)** provides Medicaid coverage for the aged, blind, and disabled whose eligibility is derived, in part, from the Supplemental Security Income (SSI) eligibility standards.

This includes SSI-related Medically Needy and activity that affects the Medicaid of an SSI cash recipient and also those persons residing in acute-care hospitals, psychiatric institutions, nursing facilities, and intermediate care facilities for the mentally retarded. Also use this code to record activity that affects only the Medicaid of State Supplementary Assistance recipients.

**111 Medical for Foster Care/Adoption (FBU 19)** provides medical services for children in foster care, or subsidized adoption.

**112 Medicaid (other than 109 - 111)** is used when a case with Medicaid is not in categories 109 through 111, such as people under age 21 who reside in an MHI or people who participate in a breast or cervical cancer program.

**128 Medicare Part D Low Income Subsidy (LIS)** provides a low income subsidy for the aged, blind, or disabled to pay for a part or all of the Medicare Part D premium for the Medicare prescription drug program.

**129 IowaCare** is an expansion of the Medical Assistance Program, with a limited benefit package and limited provider network. Eligible persons must have income less than 200% of the federal poverty level and not be eligible for the Medical Assistance Program. Services are limited to inpatient and outpatient hospital, physician, dental, and transportation if offered by the provider. Covered providers include the University of Iowa Hospitals and Clinics, Broadlawns Medical Center, and the State's Mental Health Institutions.

**135 State Supplementary Assistance** provides payments issued either by the Social Security Administration or by the Department to persons who meet all SSI eligibility requirements except for income above SSI standards and whose income is insufficient to meet the cost of certain special needs, including residential care facility care.

Use this code for activity that affects both the State Supplementary payment and Medicaid for State Supplementary Assistance recipients.

**140 Refugee Cash Assistance (06 aid type)** provides cash assistance to eligible refugees in 06 aid types who have been in the U.S. for eight months or less. Aid is terminated upon attainment of the ninth month of arrival.

Also use this code for people whose RCA is suspended and people who are eligible for RCA but receive no check because the amount is less than \$10.

**141 Refugee Medical Assistance (06 aid type)** provides medical assistance to eligible refugees in 06 aid types who have been in the U.S. for eight months or less. Aid is terminated upon attainment of the ninth month of arrival.

**300 Any Other Program (must specify)** includes any program not listed above. If this code is selected, write the specific program being worked on in the space provided.

**400 Not Limited to Specific Program** includes all activities that are not identifiable to a specific program. Program Code 400 is used with the following activity codes: "500 – lunch," "600 – Vacation, Breaks, Personal, Ill, Military," "800 - Not Scheduled To Work," and "999 – Position Vacant or Unpaid Leave."

This code may be selected for other activity codes, but workers are asked to select a specific program area from the list before selecting program code 400. When you are unsure if you are working on a specific program activity, please ask your sample taker for assistance.

**Step II: Activity** Select the one activity that best describes what you are doing at the chosen moment. The codes in this section are organized into two groups:

**Caseload Activity:** Use this group when you are working on a case and will enter a case number in the space provided on the intranet observation form. These activities apply to any of the programs and generally relate to case-specific activity.

Report the activity you are performing by selecting from the drop down list the one activity code that best describes what you are doing at the chosen moment.

If you are traveling for a case specific activity, please select the code that best describes the purpose of the travel. For example, if you are traveling to appear at a hearing, select code 307. If you need help in determining which program to mark, please refer to the following descriptions:

**300 Screening Interview/Intake** includes conducting interviews, and providing applicants with appropriate forms in the office, in the field, by mail, or by telephone.

This also includes preliminary review of application forms and verification documents in the office, in the field, by mail, or by telephone, and entering and correcting data in ABC for pending purposes.

**301 Application/Certification** includes reviewing verification documents (IEVS), preparation of calculation entries or computations, entering and correcting data in ABC or REFER, and completing necessary forms.

**302 Redetermination (review/recertification)** includes reviewing case records, verification documents (IEVS), preparation of calculation entries or computations, entering and correcting data in ABC or REFER for eligibility purposes, completing necessary forms and any policy research specific to a case, and case reviews which may affect the level of assistance.

This category includes monthly report activities and actions on client reports that do not result from a regularly scheduled review.

**303 Process Changes to Ongoing Case** includes activities which do not affect eligibility. Examples include changing an address, entering or correcting ABC or REFER data, authorizing replacement benefits, changing managed health care enrollments.

**304 Cancellation** includes all activities related to canceling a case and entering or correcting ABC data after the redetermination.

**305 Overpayment/Underpayment Processing** includes review of files, referral for investigations, calculation of overpayment or underpayment, completion of appropriate forms, vendor adjustments, court appearances, preparation of claim determinations, and issuing a receipt for an item of value.

This also includes all related data entry and correction activity for ABC and SPAD.

**306 Case Documentation** includes preparing narratives on household situation and case activity.

**307 Hearings and Appeals** includes file review, preparation of testimony (written or oral), appearance at hearing, and completion of appropriate forms.

**308 Information and Referral** includes referral of the client and providing information on behalf of the client to social services, employment agencies, housing agencies, or other governmental or private agencies.

This includes routing the appropriate copy of the *Health Services Application* to another agency.

**309 Home Visit** includes in-home contact with client or family.

**311 Sanctions/Disqualifications** includes preparing and sending a notice of decision and updating the ABC system.

**312 Verification of Alien Status** includes verifying the immigration status of an alien applying for Food Assistance, Medicaid, FIP or State Supplementary Assistance benefits.

**313 Case Reading** includes reviewing the work of another person when the decision on eligibility has already been made.

**315 Benefit Replacement** is used for all non-EBT activities when clients have not received their benefits.

Such activities include researching why the benefits were delayed; follow-up activities to correct the situation, such as tracing mail, stop-payment activities, and completing affidavits for lost and stolen warrants; and phone calls explaining to the client what happened and the necessary referrals to help clients until the benefits arrive.

When performing these activities related to EBT issuances, **use code 317**. Do **not** use code 315 for computer entry time.

**317 Electronic Benefit Transfer (EBT) Issuance** is used when you are informing the client EBT and for all EBT activities after the client is registered.

**318 Voter Registration** includes offering the opportunity to register to vote, assisting with the completion of the registration form, and the disposition of the declination and voter registration forms.

**319 Case Consultation** is used when discussing a specific case with a supervisor. Activities may also include preparation/review of e-mail, voice mail, on-line manual reviews, filing notices specific to cases, and SPIRS calls.

**General Activity:** Use this group when you are not working on a case. These are activities that do not relate to work being done on a specific case, but relate to general job duties, training, or time away from your work area.

If you are in job related travel status, select the appropriate activity that best describes the purpose of the travel. For example, if you are traveling to participate in a staff meeting, select activity code 400; if you are traveling to participate in program specific training, select activity code 401.

The codes in this section are not case-specific. However, they can be used with any program code in Section I. Do not use a code in this series if there is a specific activity code that better describes the activity being performed.

**400 Conduct/Participate in Meetings** includes preparation for the purpose of conducting or participating in unit staff meetings, as well as the actual participation or leading of unit staff meetings.

**401 Conduct/Participate in Program Specific Training** includes preparation for the purpose of conducting or participating in staff training as well as the actual participation in or leading of training. This includes supervisors training staff on program specific issues. This also includes travel to and from training.

**403 Supervisory Meeting (not case specific)** covers discussion with a supervisor not relating to a specific case or any staff meeting. If discussing a specific case, please use code 319.

**404 General Administrative Functions** includes all other non-case-related activity, such as organizing desk, filing, reading or responding to non-case specific e-mails and voice mails, attending to general clerical matters.

**450 All Other Activities (must specify)** is used when no other code in Step II describes the activity being done. Please specify the nature of this activity in the space provided on the observation form

**500 Lunch** is used when sample time is during lunch.

**600 Vacation, Breaks, Personal, Ill and Military** is selected when the employee is using paid benefit time.

**800 Sample Outside Scheduled Work Hours** means the sample moment is outside the scheduled work shift/hours of the employee and therefore the employee is not scheduled to be at work at the time of the sample.

**999 Position Vacant or Unpaid Leave** is used for leave without pay or position vacancy.

**Step III:**

**Case Number** If you are working on a specific case at the time of the sample, you will need to include the case number, client name, or client social security number on the Intranet form.

**Step IV: Comments** You must specify the program if you selected Program Code 300 (Any Other Program) in Step I above, or specify the activity if you selected Activity Code 450 in Step II above.

You may also include in the comments section any information relevant to the sample moment, such as describing specific actions associated with the activity (i.e. scheduled appointment with client).

Once you have selected one program, one activity, included a case number (if appropriate) and included any additional or relevant comments in the boxes provided, click "submit" to complete your sample response.